

● PRINTER RUSH ●
(PTO ASSISTANCE)

Application :	<u>09/814513</u>	Examiner :	<u>Jones, P</u>	GAU :	<u>2667</u>
From:	<u>[Signature]</u>	Location:	<u>IDC FMF FDC</u>	Date:	_____
Tracking #:			<u>6102592</u>	Week Date: _____	

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> <u>CLM</u>	<u>03-22-2001</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

DIRECTOR OFFICE
TECHNOLOGY CENTER 2600

JUN 01 2005

RECEIVED

[RUSH] MESSAGE: Improper Dependency: Original claim 9 depends upon higher numbered original claim 10. Please resolve.

Thank You,
[Signature]

[XRUSH] RESPONSE: _____

Corrected

INITIALS: [Signature]

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
REV 10/04